



Tommy Irvin
Commissioner

Georgia Department of Agriculture

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GEORGIA STRUCTURAL PEST CONTROL ACT INSURANCE CERTIFICATION FORM

Insured _____ License No. _____

Address _____

City _____ State _____ Zip Code _____

Insurance

Company _____

Policy No. _____ Effective Date _____ Expiration Date _____

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Licensed Categories: _____ Fumigation _____ Household Pest Control _____ Wood-destroying Organism

MINIMUM LIMITS REQUIRED

FOR PEST CONTROL AND/OR FUMIGATION LICENSE

Bodily Injury: Any One Occurrence \$50,000
Property Damage: Any One Occurrence . . . \$50,000
Minimum Annual Aggregate \$200,000

MINIMUM LIMITS REQUIRED

FOR WOOD-DESTROYING ORGANISM LICENSE

Bodily Injury: Any One Occurrence \$100,000
Property Damage: Any One Occurrence . . . \$100,000
Minimum Annual Aggregate \$500,000

INSURANCE CERTIFICATION

Certification is hereby made that insurance coverage as required by the Georgia Structural Pest Control Act has been established by the above names insured through liability insurance in the minimum amount specified above as provided in O.C.G.A. 43-45-9. Licensees for the control of wood-destroying organisms shall have coverage for claims arising from the licensee's treatment or services for control of wood-destroying organisms including errors and omission coverage on an occurrence basis. Insurance also covers legal damages resulting from sudden and accidental discharge or release of pollutants. Notification of cancellation shall be made to and received by the Secretary of the Structural Pest Control Commission no less than 30 days prior to any cancellation.

Carrier or Agent _____

By _____ Date _____

Address _____

City _____

State _____ Zip _____

Telephone _____

TO BE EXECUTED ONLY BY CARRIER OR AGENT